



**NATURALLY OCCURRING AFFORDABLE HOUSING (NOAH)
PRESERVATION REHABILITATION LOAN
PROGRAM
DOCUMENTARY STAMP SURTAX LOAN FUNDS**

This application is available at:

<http://www.miamidade.gov/housing/>

December 11, 2020



Miami-Dade County
Public Housing and Community Development
701 NW 1st Court, 16th Floor – Miami, FL 33136



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Mayor

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**MIAMI-DADE COUNTY
NATURALLY OCCURRING AFFORDABLE HOUSING (NOAH)
PRESERVATION REHABILITATION LOAN
PROGRAM**

INTRODUCTION

Naturally occurring affordable housing (NOAH) refers to unsubsidized privately owned residential properties that are lower in cost because they are older and usually poorly maintained. Rents charged for NOAH multifamily units are typically lower than those charged at market-rate units due to their age, condition, outdated design and location. However, many NOAH properties are desirable for tenants because of the location within neighborhoods that are convenient to places of work, worship, and transportation hubs, and because the rent is affordable. South Florida's expensive and highly competitive real estate market coupled with low wages has led to a housing affordability crisis. Miami-Dade County is incentivizing the preservation and rehabilitation of existing NOAH rental units by providing rehabilitation financing to owners of existing single-family homes, duplexes or small rental housing developments.

Miami-Dade County, through the Department of Public Housing and Community Development (PHCD) is soliciting applications for its Naturally Occurring Affordable Housing (NOAH) Preservation Program to be funded with Documentary Stamp Surplus (Surplus) Program funds. The NOAH Preservation Program provides resources for moderate rehabilitation to owners of existing single-family homes, duplexes and small or midsize rental housing in Miami-Dade County for the purpose of providing moderate rehabilitation. The goal is to preserve affordability by providing Miami-Dade County's low- and moderate-income households with access to decent housing that is convenient to jobs, transportation, and essential services.

PHCD has been authorized through Ordinance number 19-121 to solicit projects for rehabilitation activities through an application process that will be reviewed and approved by PHCD staff. The applicant will complete the attached application package and submit to PHCD. The NOAH Preservation application process consists of guidelines initially approved by the BCC, and an application detailing the required documentation. PHCD will evaluate and determine eligibility of all applications submitted.

PROGRAM GUIDELINES

The NOAH Preservation Rehabilitation Loan Program is a flexible loan at a below-market interest rate that can be tailored to meet the needs of owners and developers of 1 to 20 units of affordable housing within Miami-Dade County. Each application will be evaluated on its own merits and their ability to repay loan funds.

A conditional loan commitment for preservation rehabilitation activities will be provided to awardees based upon the application submitted. Loans shall be secured by a mortgage or other security instrument, which will be recorded in Miami-Dade County public records.

All requests for rehabilitation loan funds will undergo an underwriting analysis conducted by PHCD staff to determine completeness of the application and financial feasibility of proposed projects.

PHCD will review the proposed scope of work for the rehabilitation activities with the applicant. If needed, PHCD will assist the applicant to prioritize rehabilitation activities that are most essential to tenant safety, security and welfare, i.e., roof, windows, doors, and functioning heating, ventilation and air conditioning (HVAC) systems.

PHCD will determine loan disbursements schedules that will be developed with the applicant, including approved loan drawdowns to fund phases of the rehabilitation project. The County will not advance loan funding to an applicant or any subcontractor nor should the applicant have to advance funds to any party.

All funds will be disbursed to the borrower on a reimbursement basis, based on proof of payment, releases of liens and the percentage of work completed. Funds may be disbursed directly to vendors/providers for work completed and properly invoiced. Exceptions can be made with PHCD approval and adequate proof of eligible expenses.

PHCD reserves the right to limit or exceed established number of units and/or loan amounts based on project scope and the applicant's ability to meet program objectives.

PHCD reserves the right to rescind or reduce loan funds for projects that present significant material changes, including but not limited to financing, financing terms for the rehabilitation project type, or a reduction in the number of affordable housing units after being loaned funds for the project proposed in the application.

Miami-Dade County will not fund an individual or entity or an affiliate with outstanding defaulted loans, debarment actions or any other legal encumbrances with the County, State of Florida, or Federal programs regardless of the merits of the submitted proposal. Applicants may be disqualified from consideration for funding based on poor performance or non-compliance on any other projects with PHCD.

Eligible structures must be in compliance with all applicable local, state, and federal health, fire prevention, housing codes and standards, and the Florida Building Codes; or funds must be used to bring the structure up to code.

As a condition for receiving NOAH Preservation Rehabilitation loan funds, the applicant is required to maintain a minimum affordability period for set aside rehabilitated units through means of an executed and recorded restrictive covenant agreement. The required affordability period will be based on an applicant's loan amount, beginning with a minimum of 5 years and a maximum of 20 years.

Applicants who fail to complete an approved rehabilitation project within the contract terms will be in default under loan documents. Timely completion for rehabilitation projects should not exceed 6-12 months.

For purposes of this loan program, properties must be configured to provide one or more affordable rental units with 51% or more of the floor space used for residential rental purposes.

Owners and developers must provide verification of insurance appropriate to accomplish the proposed rehabilitation activity, subject to approval by Miami-Dade County.

Owners and developers will undergo credit checks using social security numbers and/or a Paydex score. Paydex scores are obtained from Dun & Bradstreet based on a DUNS number. Businesses can request a DUNS number by calling 1.866.705.5711 or visiting <http://fedgov.dnb.com/webform>.

Owners will be required to submit an owner's certification and report occupancy data annually to Miami-Dade County PHCD. NOAH Preservation Program funded properties will be monitored and inspected periodically to ensure a safe, sanitary, and secure unit for the tenant.

Displacement and/or relocation of tenants during the rehabilitation project is strictly prohibited unless expressly authorized by PHCD in advance. Any proposed relocation of a tenant must be associated with a County approved relocation plan. Per Florida Statutes, Chapter 83, Part II, the landlord is obligated to provide a dwelling unit, comply with applicable building codes, and maintain the premises. It is the duty of the landlord to make arrangements with the County and any existing tenants, prior to relocating any tenant.

The NOAH Preservation Rehabilitation Loan Program will be administered by Miami-Dade Public Housing and Community Development. Information on the program and how to apply can be found at www.miamidade.gov/housing. Applications will be accepted until further notice.

DEFINITIONS

Affordable Housing: The federal Department of Housing and Urban Development (HUD) defines an "affordable dwelling" as one that a household can obtain for 30 percent or less of its income.

Applicant: Organization submitting a proposal for funding of a housing development project.

Application Checklist: Forms identifying documents required to complete this application. **Applications lacking items and/or criteria needed to meet minimum threshold will be deemed non-responsive and will not be scored.**

C Corporation: A C Corporation, under United States federal income tax law, refers to any corporation that is taxed separately from its owners. C Corporations are distinguished from S Corporations where the profits are passed on to the shareholders, and are taxed based on personal returns.

Credit Underwriting (CU): An analytical process that determines the amount of financing necessary for completion of the construction and development of a project under the direction and oversight of PHCD. While the general intent of credit underwriting is to determine the developer's ability to repay debt, the intent of the subsidy layering review is to determine the appropriate amount of financing and the reasonableness of cost allocations. Credit underwriting is also for the purpose of determining the terms of financing and determining whether the project is financially feasible. The terms set forth in the underwriting shall be controlling.

Developer: Any individual, association, corporation, joint venture or partnership which possesses the requisite skill, experience, and credit worthiness to successfully produce affordable housing as required in the application.

General Contractor: A person or entity duly licensed in the state of Florida with the requisite skills, experience and credit worthiness to successfully provide the units required in the Application.

Income Levels: An individual or family's economic means based on AMI standards.

- Low – Income is 80% of AMI or lower
- Very Low – Income is 50% of AMI or lower
- Extremely Low - Income is 30% of AMI or lower

Limited Liability Company (LLC): An LLC is a business structure allowed by state statute. Similar to a corporation, it offers limited personal liability. LLCs are not required to hold regular stockholder or management meetings, and there are no requirements to comply with other corporate formalities. An LLC business structure allows flexibility in operation and management and passing through its income to its members with no tax at the entity level.

Minimum Threshold Requirements: Application requirements that must be satisfied for the application to be considered for funding. All documentation included on the application checklist are required. The applicant must have firm commitments for all project funding. **Applications lacking any items and/or criteria needed to meet minimum threshold will not be considered for funding.**

Naturally Occurring Affordable Housing (NOAH): NOAH properties refer to unsubsidized privately owned residential properties that are lower in cost because they are older and usually poorly maintained. Rents charged for NOAH multifamily units are typically lower than those charged at market-rate units due to their age, condition, outdated design and location. However, many NOAH properties are desirable for tenants because of the location within neighborhoods that are convenient to places of work, worship, and transportation hubs, and because the rent is affordable.

Non-Recourse: No personal liability. PHCD may take the property as collateral to satisfy a debt, but have no recourse to other assets of the borrower. A Non-Recourse Loan is a loan for which the sole source of satisfaction for default thereon is the real property that was given as collateral.

Reconstruction: the rebuilding of a structure on the same site in substantially the same manner. Reconstruction is a form of rehabilitation.

Recourse: The ability of PHCD to claim money from a borrower in default, in addition to the property pledged as collateral.

Rehabilitation: The alteration, improvement or modification of an existing structure where less than 50 percent of the proposed construction work consists of New Construction. This includes but may not be limited to the installations of improvements to upgrade substandard electrical, plumbing, roofing, siding, insulation, weatherization, heating systems, hot water heaters, and dry rot repairs.

S Corporation: Corporations that elect to pass corporate income, losses, deductions and credits through to their shareholders for federal tax purposes. Shareholders of S Corporations report the flow-through of income and losses on their personal tax returns and are assessed tax at their individual income tax rates.

Site Control: Applicants must demonstrate site control (e.g., recorded title, executed lease agreement, firm purchase contract, Option-to-Purchase, or Local Government Resolution) for the site proposed for funding.

Small Development: A multi-family development that consists of 20 units or less and includes affordable housing.

NOAH PRESERVATION REHABILITATION LOAN PROGRAM

ELIGIBILITY CRITERIA

Owner/Applicant/Borrower

- Individual owners, Developers, Non-profits
- Individuals, sole proprietorships, and legal entities:
 - Minimum equity requirement of 3%
 - Minimum credit score of 640 (individual) or minimum Paydex score of 50 (business)
- Limited partnerships and corporations:
 - Compatible with existing commercial debt
 - Meet minimum credit worthiness, financial and selection requirements
- All existing debt on the property proposed for rehabilitation/preservation must be disclosed

Eligible Properties

- Affordable housing rental unit(s)
- Affordable Single-family home, townhome or duplex
- Affordable Small residential rental housing complex (1-20 units)*
- * PHCD reserves the right to limit or exceed established unit limits based on project scope and the applicant's ability to meet program objectives.

Eligible Improvements

- Permanent general improvements to a residential structure
- Renovations or repairs that preserve or improve the basic livability, safety or utility of the roof, windows, doors, HVAC and mechanical systems, energy and water saving improvements of an existing structure

Income and Rent Limits

- Income limits are up to 80% of the Area Median Income for a family of four in Miami-Dade County
- Rents cannot exceed the annual rent limits set forth by Miami-Dade County found at <http://www.miamidade.gov/housing/income-limits.asp>

LOAN TERMS

- Purpose: Rehabilitate/Preserve Minimum 1 unit; up to a Maximum of 20 affordable housing units
- Loan Amount: Loan amounts can range from \$5,000 - \$15,000 per unit*
- Interest rate: Minimum 0% interest; Maximum 3.0% interest ; interest deferred during rehabilitation period
- Length: Minimum of 5 years – Maximum of 50 years; loan principal and interest is deferred until the completion of the rehabilitation activity (certificate of occupancy is issued), or until 12 months elapse after loan closing
- Affordability Period: Minimum of 5 years; Maximum of 20 years

Affordability Period	5 years	10 years	15 years	20 years
Loan Amounts per unit	\$5,000 - \$7,000	\$7,001 - \$10,000	\$10,001 - \$14,000	\$14,001 or greater

- Amortization begins at the completion of the rehabilitation activity (certificate of occupancy is issued)
- Conditions: Annual or Monthly loan installments. No pre-payment penalties will apply. Loans are not transferable to other projects owned by an applicant. Recourse may be required at the discretion of PHCD. No loan forgiveness.

- Negotiation: PHCD reserves the right to negotiate loan terms with the applicant to allow flexibility, while accomplishing the program's purpose of preserving Naturally Occurring Affordable Housing units.
- These loans are non-recourse if property is unencumbered by any other debt. If prior liens exist on the property then personal recourse may be required.
- Adequate collateral is required.
- * PHCD reserves the right to limit or exceed established loan limits based on project scope and the applicant's ability to meet program objectives.

MINIMUM THRESHOLD REQUIREMENTS

- Eligible Affordable Housing Preservation Rehabilitation Project
- Demonstrated Site Control
- Firm commitment; proof of all financing (if applicable)
- Equity of 3%

UNDERWRITING CRITERIA

The underwriting analysis will consist of a review of the following:

- Project Description: location, number of affordable rental units to be rehabilitated, unit AMI mix, accessibility, demographics, and income restrictions
- Project Team: Applicant/Owner/Borrower, General Partner, Guarantor, Developer and General Contractor
- Experience: Experience level of the owner and/or developer to ensure that the requisite expertise exists to complete the project
- Financial Feasibility: An analysis of application documents, firm commitments, and executed agreements
- Financial Capacity: An analysis of the financial condition of the applicant/owner/borrower; assessing the ability of the applicant/owner/borrower to repay the loan.
- Timeliness: The application must demonstrate that the rehabilitation project can be completed within the established deadline of 6 to 12 months
- Prior two years of project operating statements
- Prior two years of tax returns
- Copies of all secured mortgages on the property and corresponding loan balances

Determine Project Feasibility by analyzing the following documents within the application:

- Site Plan, general location map, and property maps
- Review of public records for outstanding debt, liens, civil court cases, judgements or building code violations
- Cost Estimate for rehabilitation is feasible based on the Physical Needs Assessment or similar rehabilitation cost estimation documentation
- Rehabilitation Plan, budget, sources and uses statement
- Development Cost Pro forma

Applicant's Budget reasonably ensures that:

- General Contractor, hard cost and soft cost contingencies meet County program requirements
- The funds requested meet program guidelines and limitations based on the information available
- The funds requested from the County in addition to owner's equity and additional declared sources of funding in the application will fully fund the proposed rehabilitation project
- Owner's equity can be satisfied with property and/or cash and must be clearly documented in the application

LOAN APPLICATION

Return this application in person to **Miami-Dade County Public Housing and Community Development (PHCD), 701 NW 1st Court, 14th Floor, Miami, Florida 33136**. If you have questions or require assistance, please call PHCD at (786) 469-2100.

Applicant's name: _____

Applicant's address: _____

City: _____ State: _____ Zip _____

Business Phone: (____) _____ Home Phone: (____) _____

Property Address: _____ Property City: _____

E-mail Address: _____

1. No. of Buildings _____ 2. No. of Apartment units _____ 3. No. of parking spaces _____

4. No. of Stories _____ 5. No. of Commercial units _____ 6. Is Building vacant? _____

7. Year built _____ 8. Current Rent \$ _____ /month 9. Proposed Rent \$ _____ /month

Applicant is: ☐ Individual(s) or General Partnership ☐ Limited Partnership ☐ Corporation ☐ LLC

Organization's Dun & Bradstreet D-U-N-S # (Required): _____

Names of Principals and respective shares of ownership

Name _____ Shares _____ Name _____ Shares _____

I. PROPOSED PROJECT COST		II. PROPOSED SOURCE OF FUNDS	
Purchase or refinance	\$ _____	Owner's Equity	\$ _____
Rehabilitation	\$ _____	PHCD Loan	\$ _____
10% contingency reserve	\$ _____	Other loan(s)	\$ _____
Construction period interest*	\$ _____		\$ _____
Construction period property taxes*	\$ _____	Total	\$ _____
Construction period insurance*	\$ _____	How do you intend to satisfy owner's equity requirement?	
Construction period rentup cost*	\$ _____	<input type="checkbox"/> Applicant cash assets <input type="checkbox"/> Existing applicant equity in property	
Financing Fee	\$ _____	<input type="checkbox"/> Cash from limited partners <input type="checkbox"/> Sell other applicant property or assets	
Total Proposed Project Cost	\$ _____	<input type="checkbox"/> Other _____	
Number of months from closing to construction completion _____			
*PHCD will calculate these for you			

SCOPE OF WORK NARRATIVE:

AGREEMENT: The undersigned applies for the loans in this application to be secured by a mortgage on the property described herein, and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application and the attachments are true and are made for the purpose of obtaining the loan. Verification and other relevant information may be obtained from any source named in this application and/or in attachments. PHCD is authorized to discuss this Application and information contained herein or in the exhibits and attachments hereto with any necessary party referenced herein. Applicant authorizes PHCD to run a credit check for purposes of this application.

Reasonable access to the property will be provided for PHCD's staff or its agents. The property title holder authorizes the release to PHCD of any existing municipal code inspection reports cited against the subject property.

The undersigned assumes responsibility for selecting and using contractors which conform to PHCD standards. PHCD does not warrant the performance of any contractor.

Signature _____ Date _____ Signature _____ Date _____

Address _____ Phone _____ Address _____ Phone _____

Signature _____ Date _____ Signature _____ Date _____

Address _____ Phone _____ Address _____ Phone _____

APPLICATION CHECKLIST

Loan Application _____

Statement of Property Ownership _____

Statement of Rental Income _____

Statement of Annual Operating Expenses _____

Verification Forms:

Information Disclosure Authorization _____

Employment _____

Mortgage(s) _____

Deposit(s) _____

Rehabilitation Plan documents:

Narrative Scope of Work _____

Project Budget _____

Sources and Uses _____

Contractor Information Form _____

In addition to completing and returning the above forms, the following documents must be provided:

Audited or Certified Financial Statements; or Previous two years Federal Income Tax Returns for the property, including all schedules with signatures _____

Two years personal federal income tax returns _____

Description of applicant's development and management experience _____

If not personally managed, name and address of proposed property manager and listing of properties and number of units currently managed _____

Evidence of site control: deed, signed sales contract, option agreement or contract purchase articles of agreement _____

Evidence of insurance on the property _____

Current rent rolls, if applicable _____

Copy of partnership (general or limited) agreement or, if applicable, other organizational documents (i.e., articles of incorporation, bylaws, corporate resolutions, etc.) _____

Copy of current property insurance _____

Copy of most recent real estate tax bill _____

Executed Construction Contract with a General Contractor and Sub Contractor's Permits (if applicable) _____

Statement of the actual cost of goods, services and equipment proposed in the project: invoices from contractors with supporting evidence of the source of the costs presented _____

Copy of current Plat, Survey or legal description of property (if applicable) _____

Floor plan drawings, architectural plans engineering reports (if applicable) _____

If self-employed or if the applicant is an S corporation:

Current year-to-date financial statements (balance sheet and profit/loss statement)

Year-end financial statements

Copy of partnership (general or limited) agreement or, if applicable, other organizational documents
(i.e., articles of incorporation, bylaws, corporate resolutions, etc.)

Incomplete information or documentation will delay the processing of your loan request. Please call (786) 469-2100 if you have any questions about completing any form or require assistance with your application.

DEVELOPMENT COST PRO FORMA

PROJECT COST	Costs
<i>Actual Rehabilitation Cost</i>	
Demolition	
Rehab of Existing Rental Units	
Accessory Buildings	
Recreational Amenities	
Rehab of Existing Common Areas	
*Other (explain in detail)	
A1. Actual Construction Cost	
Contingency (explain in detail)	
A1.1 Sub-Total	
A1.2 General Contractor Fee cannot exceed 14%	
A1.3 Total Actual Construction Cost	

<i>Financial Cost</i>	
PHCD Loan Interest	
PHCD Loan Origination Fee	
A2. Total Financial Cost	

<i>General Development Cost</i>	
Accounting Fees	
Appraisal	
Architect's Fee – Design	
Architect's Fee – Supervision	
Builder's Risk Insurance	
Building Permit	
Engineering Fee	
Environmental Fee	
Environmental Report	

Inspection Fees	
Insurance	
Legal Fees	
Property Taxes	
Survey	
Title Insurance	
Utility Connection Fee	
*Other (explain in detail)	
*Contingency (7) (explain in detail)	
A3. Total General Development Cost	

B. Development Cost (A1.3+A2+A3)	
---	--

C. Developer's Fee/ Overhead expenses	
--	--

D. Total Development Cost (B+C)	
--	--

Explanation of Other costs.

Actual Construction Cost - Other	Amount	Description
General Development Cost - Other	Amount	Description

CONSTRUCTION OR REHABILITATION ANALYSIS

	Amount	Documentation Attached
A. Total Development Cost		
B. Sources		
County Funds		
First Mortgage Financing		
Second Mortgage Financing		
Third Mortgage Financing		
Deferred Developer Fee		
Grants		
Equity – Partner’s Contribution		
Other:		
Other:		
Total Sources		
C. Financing Shortfall (A minus B)		

PERMANENT ANALYSIS

	Amount	Documentation Attached
A. Total Development Cost		
B. Sources		
C. County Funds Requested		



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

STATEMENT OF PROPERTY OWNERSHIP

Property Address: _____

A. Owner of property answer the following:

1. Date Acquired _____
2. Acquisition price \$ _____
3. Estimated current market value \$ _____
4. Cash invested (to date):
Down payment \$ _____
Loan principal repayment \$ _____
Rehabilitation \$ _____
5. Current outstanding debt \$ _____

Existing Mortgages	Interest Rate	Amortization Schedule	Year Due	Monthly Payment	Mortgage Balance	Mortgage Holder
1st						
2nd						

B. List of any liens and unpaid bills connected with this property.



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

STATEMENT OF RENTAL INCOME

Property Address: _____

UNIT TYPE	NUMBER UNITS	SQ. FEET PER UNIT	CURRENT RENT PER UNIT	PROJECTED RENT PER UNIT	* TOTAL PROJECTED* MONTHLY RENT (# OF UNITS X RENT/UNIT)
STUDIO					
1 BEDROOM					
2 BEDROOM					
3 BEDROOM					
4 BEDROOM					
OTHER INCOME (GARAGE/LAUNDRY)					

TOTAL UNITS: _____

TOTAL MONTHLY RENT: \$ _____

TOTAL YEARLY RENT: \$ _____

_____ % VACANCY ALLOWANCE (Minimum 5%): \$ _____

ANNUAL RENT MINUS VACANCY: \$ _____

Projected rents are the rent levels you expect to achieve after rehabilitation has been completed.



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

STATEMENT OF ANNUAL OPERATING EXPENSES

Property Address: _____

I. Operating Expenses	Current Expenses	Projected Expenses*
Utility Costs** - Gas	\$ _____	\$ _____
- Electric	\$ _____	\$ _____
- Water/Sewer	\$ _____	\$ _____
Management Fee	\$ _____	\$ _____
Property Taxes	\$ _____	\$ _____
Janitor	\$ _____	\$ _____
Repair/Maintenance	\$ _____	\$ _____
Painting	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Scavenger	\$ _____	\$ _____
Exterminating	\$ _____	\$ _____
Advertising (Marketing)	\$ _____	\$ _____
Legal	\$ _____	\$ _____
Reserves	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total Annual Expenses	\$ _____	\$ _____

II. If the above costs are not based on current operating costs, please explain:

III. List utilities paid by tenant:

* Projected Expenses are those costs anticipated for the year following rehabilitation/preservation. Expense figures should include an allowance for inflation.

** If any utilities are paid by tenant, please write "Tenant Paid" and list in Section III of this schedule.



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

INFORMATION DISCLOSURE AUTHORIZATION

To whom it may concern:

I/We hereby authorize you to release to Miami-Dade County Department of Public Housing and Community Development (PHCD), for verification purposes, information concerning:

- _____ **Employment history, dates, title, income (hours worked, etc.)**
- _____ **Bank and deposit account records**
- _____ **Mortgage loan rating (opening date, high credit, payment amount, loan balance and payment record)**
- _____ **Any information deemed necessary in connection with a consumer credit report**

This information is for the confidential use of PHCD, and is exempt from public records disclosure per Florida Statute 119.

A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature(s) of the undersigned) may be deemed to be the equivalent of the original and may be used as a duplicate original up to 90 days from date of signature. Your prompt reply is appreciated.

Print Name

Social Security Number

Signature

Date

Print Name

Social Security Number

Signature

Date



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT
REHABILITATION/PRESERVATION NARRATIVE SCOPE OF WORK

PROPERTY ADDRESS: _____

NUMBER OF UNITS: Total: _____ Residential: _____ Commercial: _____ Number of Stories: _____

DATE: _____

PLEASE GIVE A BRIEF DESCRIPTION OF THE EXTENT AND SCOPE OF WORK TO BE DONE. PLEASE ADDRESS EACH ITEM AND ADD CATEGORIES IF NECESSARY. IF NO WORK IS NEEDED, SHOW "N/A". IF SOME WORK IS PLANNED TO BE DONE AT A LATER DATE FROM RENT PROCEEDS, SAY SO.

I. GENERAL

A. PLANS:

B. PERMITS:

C. DEMOLITION:

D. ENVIRONMENTAL:

E. THE APPROXIMATE AREA OF THE FOUNDATION "FOOTPRINT" OF THIS BUILDING IS
_____ SQUARE FEET.

F. ANTICIPATED LENGTH OF CONSTRUCTION: _____ MONTHS

II. BUILDING EXTERIOR

- A. FRAMING (exterior walls, roof – new or repair):

- B. BRICKWORK/LINTELS:

- C. WINDOWS:

- D. EXTERIOR PAINTING/SIDING:

- E. ROOF:

- F. GUTTERS/DOWNSPOUTS AND YARD DRAINS:

- G. PORCHES:

- H. CONCRETE/PAVING:

I. FENCING/LANDSCAPING:

J. PORCH/YARD LIGHTING

III. COMMON AREAS

A. ENTRANCE DOORS AND VESTIBULES:

B. MAILBOXES/INTERCOMS:

C. ELEVATOR:

D. STAIRWAY REPAIR AND DECORATING:

E. CORRIDOR REPAIR AND DECORATING:

F. STAIR, CORRIDOR LIGHTING/SMOKE DETECTORS:

G. BASEMENT:

H. INSULATION

IV. SYSTEMS

A. ELECTRICAL: (please mention smoke and carbon dioxide detectors in apartments, basements, stairways and corridors, as appropriate for your building.)

B. PLUMBING:

C. HEATING/ENERGY MANAGEMENT SYSTEMS:

D. FIRE SPRINKLER AND ALARM SYSTEMS:

V. SITE WORK (THIS SECTION IS FOR NEW CONSTRUCTION ONLY – Insert N/A if Not Applicable)

A. EXCAVATION/GRADING:

B. STORM DRAINAGE:

C. SANITARY SEWER:

D. WATER SERVICE:

E. ELECTRIC SERVICE:

F. GAS SERVICE:

VI. INDIVIDUAL UNITS

A. ROUGH CARPENTRY:

B. DRYWALL/PLASTERING:

C. FLOOR COVERING, REFINISHING, REPAIR:

D. DOORS:

E. TRIM:

F. BATHS:

G. KITCHENS:

H. APPLIANCES:

I. PAINTING/DECORATING:

VII. SECURITY

BY: _____
OWNER

BY: _____
CONTRACTOR

DATE: _____

DATE: _____



PUBLIC HOUSING AND COMMUNITY DEVELOPMENT
CONTRACTOR INFORMATION FORM

(completed by the Contractor and verified by PHCD; fill in all lines; insert NONE, -0-, or N/A where applicable)

NAME OF FIRM: _____

CONTRACTOR'S LICENSE NUMBER:
(attach copy of license): _____

NAME OF PRINCIPALS: _____ TITLE: _____
_____ TITLE: _____
_____ TITLE: _____

ADDRESS: _____ PHONE: _____
_____ FAX: _____

TYPE OF CONTRACTOR: ☐ Building Contractor ☐ General Contractor ☐ Subcontractor

FORMS OF OWNERSHIP: ☐ Sole ☐ Partnership ☐ Corporation

Trades Carried: _____; _____; _____; _____

DOLLAR VOLUME PREVIOUS 12 MONTHS: \$ _____

NUMBER OF YEARS IN BUSINESS: _____

IN SUPPORT OF THE INFORMATION FURNISHED ABOVE REGARDING VOLUME, PLEASE INCLUDE A COPY OF YOUR FIRM'S MOST RECENT INCOME STATEMENT AND BALANCE SHEET.

NUMBER OF EMPLOYEES:
Administration/Management/Supervisors: _____

Trades: _____

LINES OF CREDIT AT BANKS OR WITH SUPPLIERS:

<u>Institution</u>	<u>Contact Person</u>	<u>Phone</u>	<u>Amount</u>
1. _____			
2. _____			
3. _____			

\$ AMT OF CONTRACTOR'S GEN. LIAB. INS. _____ POLICY EXPIRATION DATE: _____

\$ AMT OF WORKER'S COMPENSATION INS. _____ POLICY EXPIRATION DATE: _____

\$ AMT OF AUTO LIABILITY INSURANCE _____ POLICY EXPIRATION DATE: _____

If applicable, can you provide a PERFORMANCE BOND? _____

OR an IRREVOCABLE LETTER OF CREDIT For 15% of your Contract? _____

LIST THE 4 MOST RECENT JOBS OF COMPARABLE DOLLAR VOLUME YOU HAVE DONE:

Job Address, Contact Person & Phone Number	Dollar Amount	Number of Apartments	Start Date	Completion Date
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Signature: _____

Title: _____

Date: _____